PTO/SB/30 (10-01)

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## REQUEST **FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL**

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nformation unless it displays a valid OMB control number?					
Application Number	10/662,405				
Filing Date	September 16, 2003				
First Named Inventor	FUKUDA				
Art Unit	2871				
Examiner Name	Michael H. Caley				
Attorney Docket Number	HITA.0433				

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plan application filed prior to June 8, 1995, or to any design application. See instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.										
a.	☐ Previously si i. ☐ Considii. ☐ Considiii. ☐ Other ☑ Enclosed ii. ☑ Respo	der the amendment(s)/reply und der the arguments in the Appeal	Brief iii.	f or	Reply Brid	ef previous				
a.	a.   Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)									
The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filled.  a. ☑ The Director is hereby authorized to charge any additional fees, or credit any overpayments to Deposit Account No. 08-1480 i. ☑ RCE fee required under 37 CFR 1.17(e) ii. ☑ Extension of time fee (37 CFR 1.136 and 1.17) iii. ☑ Other Excess claims fee b. ☑ Checks in the amount of \$790.00 for the RCE fee, \$450.00 for the 2-month extension fee and \$180.00 for the late IDS fee are enclosed c. ☐ Payment by credit card (Form PTO-2038 enclosed). Warning: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card Information on PTO-2038.										
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED										
Name (Print/Type)		Juan Carlos A. Marquez			Regis	Registration NO. (attorney/agent)		34,072		
Name (Print/Type)		Stanley P. Fisher			Regis	Registration NO. (attorney/agent)		24,344		
Signat	Signature C C C C C C C C C C C C C C C C C C C		Date	Date August 9, 2007						
// CERTIFICATÉ OF MAILING OR TRANSMISSION										
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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Tradearmk Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.

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